#### Nebraska Division of Behavioral Health

## **MQIT**

# March 25, 2014 / 9:00-9:30 a.m. Central Time DBH/Live Meeting & Conference Call

### **Meeting Notes**

I. Attendance Bob Bussard

Region I – Judie Moorehouse and Phil Darley

Region II - Angie Smith and Mary Wagner

Region III - Ann Tvrdik

Region IV - Amy Stachura, Ginger Marr, Melinda Crippen, and Tana Godel

Region V - Linda Wittmuss

Region VI - Joel Case, John Murphy, and Stacey Brewer

Magellan – Lisa Christensen, Patti Ryan, and Tamara Gavin

DBH –Heather Wood, Sue Adams, Bob Bussard, Cody R. Meyer, Jan Goracke, Kunal Dash, Mikayla Kuhlen, and Teresa LaFon

II. Welcome Bob Bussard

- A. Bob welcomed attendees to the meeting. Attendance was taken.
- B. Overview of agenda. No additions were requested.
- C. The February 18, 2014 Draft Meeting Notes were approved.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Send approved February 18, 2014 Meeting Notes to group via email and post on web site:	Robert Bussard	Complete
http://dhhs.ne.gov/behavioral health/Pages/beh mgit.aspx		

#### III. Magellan Updates

Bob Bussard, Lisa Christensen, Tamara Gavin

#### 1. Report Updates

Bob Bussard and Tamara Gavin

- A. Average Handle Time Report CSA Average handle time for February The calls that have come in have changed significantly. We have two types of calls: Processing Claims calls and all other calls. St. Louis was taking all claims calls, but that has been moved locally. We have the same number of FTE's but we have the same volume of calls but just different type of calls. Processing and accuracy is overwhelming positive. The average handle time is staying the same. For faster and more efficient services when calling regarding a claim please have the following information available: Claim Number, Medicaid Number, Date of Birth of the Member, Date of Service, also whether you have/or will filed electronically or by paper. There is a lot of support needed. You can use the web site to help expedite the process. The uptick in the average handle time is reflected due to the change of this process.
- B. The Appeals Reports This report will be sent out to MQIT member's right after the MQIT meeting.

#### 2. Regional Questions/Answers

Bob Bussard, Lisa Christiansen, Patti Ryan, and Tamara Gavin

Regions that have questions for Magellan should have these to Bob Bussard by the <u>end of day Thursday</u>, <u>prior to the next scheduled MQIT meeting</u> (Robert.bussard@nebraska.gov).

Answers will be better addressed if Regions are able to submit their questions with examples or other details rather than generic questions.

Bob Bussard and Tamara Gavin addressed a few questions:

- A. **Authorizations for the NBH System** Tamara gave a little background information on this. Magellan moved to the DSM V format back in December. Magellan did not switch the DBH authorization side. Providers can give the same information as they have before and Magellan will continue to crosswalk that information into the DSM IV. Magellan will continue to submit the GAF scores and the Axis 4. Additional data is necessary for regional authorizations for providers. Magellan is reconstructing DSM IV, Axis 3, 4, and 5 using information from Authorizations as NBHS needs this data for Federal reporting. Agencies going forward will be asked for these codes until DBH can change based on Federal guidance.
- B. **ICD 10** Magellan is preparing for the implementation of ICD 10 so, providers will need to work with your vendors to make sure you can report ICD 10. Medicaid is strongly encouraging this to be done so that providers will get paid after the October 1, 2014 deadline. Individuals will need to be ready for the implementation of ICD 10 beginning on October 1, 2014. There is confusion in the DSM in comparison to the numeric coding in relation to ICD 9 or 10. Both billing codes are listed in DSM 5 for ICD 9 and ICD 10. Magellan will not be able to help with cross walking. The providers will need to look at the appropriate coding for their billing process and find which one is the most appropriate.
- C. **At Risk Contract** Hanging Authorizations and the impact of the NOM's report- we do the NOM's according to the registration date. When looking at the reauthorizations, are the NOM's collected at the time of re-registration? Nothing has been done in regards to this issue at this time and whether it is an administrative discharge or not.
- D. **Discharge Compliance Report MRO ASA Waiver Information Update** A facility had 30 people and now have 196 on their report, why are there so many on there? They are MRO and ASA clients and are Medicaid eligible individuals. Is there an estimated time that this report will represent the current client situation? DBH is working with Magellan to get this issue worked out.

#### IV. Provider Manual Feedback

**Bob Bussard** 

We continue to update the Manual as there are questions or need for further clarifications. Please continue to provide feedback. The provider manual is on the web.

V. Meeting Close Heather Wood

- A. April Agenda Items: Transition from ICD 9 to ICD 10. What do providers need?
- B. April agenda items are requested to <u>Robert.bussard@nebraska.gov</u> (402-471-7821) or <u>Heather.Wood@Nebraska.gov</u> (402-471-1423) by April 17, 2014.
- C. Next MOIT is April 22, 2014 from 9:00-10:00 a.m. (CDT).
- D. Meeting was adjourned at 9:30 a.m. (CDT).

Notes prepared by the Division of Behavioral Health, Nebraska Department of Human Services. Notes are intended to provide only as a general summary of the proceedings